

**CLAIMS ONLY**

Application Number

" Filing " Date

Applicant(s)

CLAIMS	AS FILED 1/6/06		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep.	Depend	Indep	Depend	Indep	Depend
1						
2						
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47						
48						
49						
50						
Total indep	4					
Total depend	26					
Total claims	30					

\* May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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100						
Total indep						
Total Depend						